PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004  /0/922209												09:-
1/-24-03 (Column 1) (Column 2)									ENTITY	0	OTHE SMALL	R THAN ENTITY
	FOTAL CLAIM	s 40			<u> </u>	<u> </u>		RATE FE			RATE	FEE
ſ	OR	NUMBE	R FILED	NUN	UMBER EXTRA		BASIC FEE 150.		0 O	BASIC FE	300.00	
7	OTAL CHARG	EABLE CLAIMS	90	90 minus 20=		20	X\$ 25=			O	X\$50=	
ΙN	DEPENDENT	CLAIMS	18	minus 3 =	<u> </u>	5	X100		0	OF	X200=	
M	MULTIPLE DEPENDENT CLAIM PRESENT							+180= ()		OF	+360=	·
* If the difference in column 1 is less than zero, enter "0" in column 2											TOTAL	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY OR				THAN
AMENDMENTA		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESENT EXTRA	Г	RATE	ADDI- TIONAI FEE	7	RATE	ADDI- TIONAL FEE
	Total:	. 40	Minus	-40	) ·	-	,	<b>(\$</b> 25=		OR	X\$50=	
AME	Independent	1. 8	Minus	<u>  8</u>		1-	X100=			OR	X200=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							180=		<b> </b>	+350=	
				•				TOTAL	<del> </del>	OR	TOTAL	
	(Column 1) (Column 2) (Column 3)						ADI	DIT. FEE		JOR	ADDIT. FEE	<u> </u>
_		(Column 1) CLAIMS	1	HIGHE	ST	(Column 3)	Ė		ADDI-	<b>1</b>		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PAID F	JSLY	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL
	Total ·	•	Minus	;		=	X	\$ 25=		OR	X\$50=	
	Independent	•	Minus			a .	×	100=		OR	X200=	
٢	FIRST PRESE	NTATION OF MU	ILTIPLE DE	TIPLE DEPENDENT CLAIM			-			UH		
	·							180=	•	OR	+360=	
	·									OR ,	TOTAL ADDIT. FEE	
-,	·	(Column 1) CLAIMS			(Column 2) (Column 3)							·
۶ ۲		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	R	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	#4	_ 1	=	XS	25=		OR	X\$50=	
	Independent	•	Minus	•••		=	-	00=			X200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	- J	<u> </u>	OR	A200=	
* If the entry in column 1 is less than the entry in column 2, write 10° in column 3.												
- H	the "Highest Nun	nber Previously Pai	d For IN THI	S SPACE IN IA	TS then	20 enter 20 *		TOTAL T. FEE		OR	TOTAL ODIT. FEE	
_u	trie mighest Nur he Highest Nurt	mber Previously Pai ber Previously Paid	g For IN THI For (Total or	S SPACE is le Independent)	iss than Is the I	i 3, enter "3." highest number h			ropriate box			